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DLN: 93493080004172

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements

2010

Open to Public

Inspection

calendar year, or tax year beginning 07-01-2010 and ending 06-30-2011 A For the 2010 D Employer identification number C Name of organization
SAN DIEGO STATE UNIVERSITY FOUNDATION B Check if applicable Address change DBA SDSU RESEARCH FOUNDATION 95-6042721 Doing Business As Name change E Telephone number Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite (619) 594-5771 5250 CAMPANTIE DRIVE . Terminated G Gross receipts \$ 212,251,787 City or town, state or country, and ZIP + 4 SAN DIEGO, CA 921821947 Amended return Application pending Name and address of principal officer **H(a)** Is this a group return for affiliates? Yes **BOBE WOLFSON** 5250 CAMPANILE DRIVE **H(b)** Are all affiliates included? SAN DIEGO, CA 921821947 If "No," attach a list (see instructions) H(c) Group exemption number ► Tax-exempt status Website: ► HTTP //WWW FOUNDATION SDSU EDU K Form of organization ✓ Corporation ✓ Trust ✓ Association ✓ Other ► L Year of formation 1943 M State of legal domicile CA Summary Part I 1 Briefly describe the organization's mission or most significant activities PROVIDE SUPPORT TO THE RESEARCH, EDUCATIONAL AND COMMUNITY SERVICE PROGRAMS OF SDSU Activities & Governance 2 Check this box 📂 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) $\,$. $\,$. 16 4 Number of independent voting members of the governing body (Part VI, line 1b) . 4 4 5 4.461 Total number of individuals employed in calendar year 2010 (Part V, line 2a) Total number of volunteers (estimate if necessary) 6 350 7a Total unrelated business revenue from Part VIII, column (C), line 12 **7**a 196,812 **b** Net unrelated business taxable income from Form 990-T, line 34 7b -43,825 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . 79,289,199 86,721,016 Rayenue Program service revenue (Part VIII, line 2g) . 91,370,102 97,057,654 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 1,704,558 1,803,177 Other revenue (Part VIII. column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 -1,410,440 -1,556,376 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 170,953,419 184,025,471 13 7.597.745 7.506.313 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 14 Benefits paid to or for members (Part IX, column (A), line 4) . 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5 Expenses 93,617,388 97,567,906 16a Professional fundraising fees (Part IX, column (A), line 11e) . 311,058 328,755 Total fundraising expenses (Part IX, column (D), line 25) ▶ 2,794,740 b **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . 67,516,776 74,539,988 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 169,042,967 179,942,962 19 Revenue less expenses Subtract line 18 from line 12 $\,$. 4,082,509 1,910,452 Net Assets or Fund Balances **Beginning of Current End of Year** Year 20 Total assets (Part X, line 16) . 181,850,590 186,933,922 21 Total liabilities (Part X, line 26) . 120,220,319 116,522,819 Net assets or fund balances Subtract line 21 from line 20 61,630,271 70,411,103 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 2012-03-12 Signature of officer Sian Here DAN M GILBREATH EXECUTIVE DIRECTOR Type or print name and title Check if self Preparer's signature Date PTIN employed 🕨 🕻 ROSEMARIE BROWN preparer's name Paid Firm's name MCGLADREY & PULLEN LLP Firm's EIN Preparer Firm's address 🕨 515 S FLOWER STREET 41ST FLOOR Phone no 🕨 (213) 330-**Use Only** LOS ANGELES, CA 90071

May the IRS discuss this return with the preparer shown above? (see instructions)

ΓNο

✓ Yes

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Par		of Program Servedule O contains a res		lishments uestion in this Part III		
_		organization's missio				
	VIDE SUPPORT TO F ECTIVES OF SDSU	PROGRAMS THAT AF	RE INTEGRAL T	O THE RESEARCH, E	DUCATIONAL AND COMMU	JNITY SERVICE
2		undertake any signifi or 990-EZ?			which were not listed on	┌ Yes ┌ No
	If "Yes," describe th	ese new services on S	Schedule O			
3	-	cease conducting, or	_	nt changes in how it co	nducts, any program	┌ Yes ┌ No
	If "Yes," describe th	ese changes on Sche	dule O			
4	Section 501(c)(3) a	nd 501(c)(4) organıza	itions and secti	3	largest program services by are required to report the amo service reported	•
4a	(Code) (Expenses \$	108,753,553	including grants of \$	7,401,188) (Revenue \$	135,239,456)
		DATION ("SDSURF")ADMI EGION, THE NATION, AND		R THE SPONSORED RESEAF	RCH EFFORTS OF SDSU FACULTY W	HO ARE RESEARCHING ISSUES
	(Code) (Expenses \$	28,781,236	ıncludıng grants of \$) (Revenue \$	27,257,787)
	SDSURF ADMINISTERS	FUNDS THAT SUPPORT TH	E WORK OF PROJE	CTS THAT FOCUS ON CAME	PUS AND COMMUNITY IMPROVEMEN	Т
4c	(Code) (Expenses \$ FUNDS FOR SDSU'S PUBLI	20,531,595	including grants of \$) (Revenue \$	21,173,791)
		I ONDS I OK SUSO S PUBL	C DROADCASTING	ארויו, אדטס		
4d	Other program serv	vices (Describe in Sc	hedule O)			
	(Expenses \$		cluding grants o	f \$) (Revenue \$)
4e	Total program serv	ice expenses►\$	158,066,38	3.4		

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 😼	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV.	16	Yes	
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νο
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		Νο
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	IV	28a		Νo
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Νο
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Yes	
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

Part V	Statements	Regarding	Other I	RS Filings	and Tax	Compliance

Form	990 (2010)			Page 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance		_	
	Check if Schedule O contains a response to any question in this Part V	•	<u>.</u> Г	
4-	Enter the number reported in Pay 2 of Form 1006. Enter 10 of the templicable		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . 1a 1,156	5		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
_	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	-		
	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax</i> Statements filed for the calendar year ending with or within the year covered by this			
	return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	36	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	res	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		No
Ь	If "Yes," enter the name of the foreign country	_		
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
_		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a	Yes	
а	services provided to the payor?	74	162	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	'		110
	- · · · · · · · · · · · · · · · · · · ·			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
n	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Yes	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did			
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a	_		
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1		
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)	-		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
13	year Section 501(c)(29) qualified nonprofit health insurance issuers.	-		
	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
_	In which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand	1		
·	13c]		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax			
	year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	ection B. Policies (This Section B requests information about policies not required by the Internal evenue Code.)			
	· · · · · · · · · · · · · · · · · · ·		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?			
		11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		No
Ь	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ▶ CA			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you make these available Check all that apply			

Own website Another's website 🔽 Upon request

(619) 594-5771

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization MELINDA S COIL

 5250 CAMPANILE DRIVE

 SAN DIEGO, CA 921821947

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organ		elated o	rgan	ızatı	on c	omper	sate	d any current office	er, director, or trust	ee
(A) Name and Title	(B) A verage hours	Posi	(C) Position (check all that apply)					(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See Additional Data Table										
-										
			<u> </u>							

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Name and Title Next rage Position (Check all training parts of the compensation		(A)	(B)	1		<u></u>				(D)	(E)	1	/E)	
See Additional Data Table Description D			Average		ition	che)		П		Reportable	Reportable		Estima	ated
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Total from continuation sheets to Part VII, Section A	See A	dditional Data Table												
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Total from continuation sheets to Part VII, Section A		Sub Tatal							<u> </u>					
d Total (add lines 1b and 1c)							•	<u> </u>						
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization P43 Ves No 3			<u>.</u>						 	2,490,789	3,530,27	72	1,	269,069
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual								above) who	received more tha	n	_		
Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		\$100,000 in reportable compen	sation from the	organız	atıon	► 4 3	:							
on line 1a? If "Yes," complete Schedule J for such individual													Yes	No
For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	3	<u>-</u>	•				ey e	mploy	ee, c	or highest compens	ated employee			
organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual							•	•	•			3	Yes	
Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	4													
Section B. Independent Contractors 1					•				•			4	Yes	
Section B. Independent Contractors 1	5													
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization (A) (B) (C) Compensation PONDER IDEALWORKS INC 20291 RAVENWOOD LANE HUNTINGTON BEACH, CA 92646 COLLEGE CONTACTCOM HAMMER STR 39 MUENSTER 48153 GM STUDENT RECRUITMENT 417,694 GM STUDENT RECRUITMENT 417,694 GM CHARITABLE AUTO RESOURCES INC 7250 ENGINEER ROAD SUITE D SAN DIEGO, CA 92111 CHARITABLE AUTO RESOURCES INC 4669 MURPHY CANYON RD STE 100 SAN DIEGO, CA 92123 EXTREME LEARNING INC 155 E MAIN AVE 170 MORGAN HILL, CA 95037 2 Total number of independent contractors (including but not limited to those listed above) who received more than		services rendered to the organiz	zation? <i>If "Yes,"</i>	complet	e Sch	edul	e J f	or suct	n per	son	•	5		No
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization (A) (B) (C) Compensation PONDER IDEALWORKS INC 20291 RAVENWOOD LANE HUNTINGTON BEACH, CA 92646 COLLEGE CONTACTCOM HAMMER STR 39 MUENSTER 48153 GM STUDENT RECRUITMENT 417,694 GM STUDENT RECRUITMENT 417,694 GM CHARITABLE AUTO RESOURCES INC 7250 ENGINEER ROAD SUITE D SAN DIEGO, CA 92111 CHARITABLE AUTO RESOURCES INC 4669 MURPHY CANYON RD STE 100 SAN DIEGO, CA 92123 EXTREME LEARNING INC 155 E MAIN AVE 170 MORGAN HILL, CA 95037 2 Total number of independent contractors (including but not limited to those listed above) who received more than	Se	ection B. Independent Con	tractors											
(A) Name and business address PONDER IDEALWORKS INC 20291 RAVENWOOD LANE HUNTINGTON BEACH, CA 92646 COLLEGE CONTACTCOM HAMMER STR 39 MUENSTER 48153 GM ISS FACILITY SERVICES INC 7250 ENGINEER ROAD SUITE D SAN DIEGO, CA 92111 CHARITABLE AUTO RESOURCES INC 4669 MURPHY CANYON RD STE 100 SAN DIEGO, CA 92123 EXTREME LEARNING INC 155 E MAIN AVE 170 MORGAN HILL, CA 95037 (C) Compensation CONSULTING STUDENT RECRUITMENT 417,694		Complete this table for your five	highest compe		ındep	end	ent	ontra	ctors	that received more	e than			
Name and business address PONDER IDEALWORKS INC 20291 RAVENWOOD LANE HUNTINGTON BEACH, CA 92646 COLLEGE CONTACTCOM HAMMER STR 39 MUENSTER 48153 GM ISS FACILITY SERVICES INC 7250 ENGINEER ROAD SUITE D SAN DIEGO, CA 92111 CHARITABLE AUTO RESOURCES INC 4669 MURPHY CANYON RD STE 100 SAN DIEGO, CA 92123 EXTREME LEARNING INC 155 E MAIN AVE 170 MORGAN HILL, CA 95037 Consulting of services Compensation CONSULTING CONSULTING STUDENT RECRUITMENT 417,694		\$100,000 of compensation from		n							(P)		/6	`
20291 RAVENWOOD LANE HUNTINGTON BEACH, CA 92646 COLLEGE CONTACTCOM HAMMER STR 39 MUENSTER 48153 GM ISS FACILITY SERVICES INC 7250 ENGINEER ROAD SUITE D SAN DIEGO, CA 92111 CHARITABLE AUTO RESOURCES INC 4669 MURPHY CANYON RD STE 100 SAN DIEGO, CA 92123 EXTREME LEARNING INC 155 E MAIN AVE 170 MORGAN HILL, CA 95037 CONSULTING CONSULTING STUDENT RECRUITMENT 417,694 417,694				dress						Descr				
COLLEGE CONTACTCOM HAMMER STR 39 MUENSTER 48153 GM ISS FACILITY SERVICES INC 7250 ENGINEER ROAD SUITE D SAN DIEGO, CA 92111 CHARITABLE AUTO RESOURCES INC 4669 MURPHY CANYON RD STE 100 SAN DIEGO, CA 92123 EXTREME LEARNING INC 155 E MAIN AVE 170 MORGAN HILL, CA 95037 Total number of independent contractors (including but not limited to those listed above) who received more than	2029	RAVENWOOD LANE								CONSULTING				510,975
MUENSTER 48153 GM ISS FACILITY SERVICES INC 7250 ENGINEER ROAD SUITE D SAN DIEGO, CA 92111 CHARITABLE AUTO RESOURCES INC 4669 MURPHY CANYON RD STE 100 SAN DIEGO, CA 92123 EXTREME LEARNING INC 155 E MAIN AVE 170 MORGAN HILL, CA 95037 MORGAN HILL, CA 95037 SIUDENT RECRUITMENT 417,694 417,694														
7250 ENGINEER ROAD SUITE D SAN DIEGO, CA 92111 CHARITABLE AUTO RESOURCES INC 4669 MURPHY CANYON RD STE 100 SAN DIEGO, CA 92123 EXTREME LEARNING INC 155 E MAIN AVE 170 MORGAN HILL, CA 95037 AND STEAM OF THE PROPERTY OF T	MUEN									STUDENT RE	CRUITMENT			417,694
CHARITABLE AUTO RESOURCES INC 4669 MURPHY CANYON RD STE 100 SAN DIEGO, CA 92123 EXTREME LEARNING INC 155 E MAIN AVE 170 MORGAN HILL, CA 95037 Total number of independent contractors (including but not limited to those listed above) who received more than	7250	ENGINEER ROAD SUITE D								JANITORIAL S	SERVICES			327,497
EXTREME LEARNING INC 155 E MAIN AVE 170 MORGAN HILL, CA 95037 224,400 Total number of independent contractors (including but not limited to those listed above) who received more than	CHAR 4669	ITABLE AUTO RESOURCES INC MURPHY CANYON RD STE 100								FUNDRAISIN	G			300,502
2 Total number of independent contractors (including but not limited to those listed above) who received more than	EXTRI 155 E	EME LEARNING INC MAIN AVE 170								CONSULTING				224,400
	2	Total number of independent cont			ot lır	nıte	d to	those	liste	d above) who receiv	ed more than			

Form 9 Part		· · · · · · · · · · · · · · · · · · ·	10				Pag	ge 9
7211		- Statement of Revent	16		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns Membership dues Fundraising events	. 1c . 1d . 1e . and 1f . nes 1a-1f \$	82,558 68,410 60,204,760 26,365,288 1,303,835	86,721,016			
Program Service Revenue		CONTRACTS GOVERNMENT FEES & TUITION CONTRACTS NON-GVRNMNT CAMPUS & COMMUNITY All other program service rev Total. Add lines 2a-2f		541900 611600 541900 515100	26,777,566 14,891,462	49,638,068 26,777,566 14,891,462 5,568,659	181,899	
	4 5 6a b	Investment income (including and other similar amounts) Income from investment of tax-ext. Royalties	(i) Real 9,729,706 11,502,958 -1,773,252	(II) Personal	1,822,125 284,049 -1,773,252			1,822,125
nue	7a b c d	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss)	(I) Securities 16,456,287 16,475,235 -18,948	(II) O ther	-18,948			-18,948
Other Revenue	c 9a b c	\$68,410 of contributions reported on See Part IV, line 18 Less direct expenses Net income or (loss) from fur Gross income from gaming a Less direct expenses Net income or (loss) from ga Gross sales of inventory, les returns and allowances .	a b Indraising events	159,702 248,123 b	-88,421			-88,421
	11a	d All other revenue	les of inventory	Business Code 515100	21,248	-5,083	14,913	11,418
		Total. Add lines 11a-11d Total revenue. See Instructi	▶		21,248 184,025,471	96,870,672	196,812 rm 990 (20	

	990 (2010)				Page 10
Par	t IX Statement of Functional Expenses				
	Section $501(c)(3)$ and $501(c)(4)$ organizations must omplete column (A) but are not required to α			(D)	
Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21		ехрепзез	general expenses	ехрепзез
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	7,401,188	7,401,188		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	105,125	105,125		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,366,290	438,590	927,700	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	74,031,375	63,624,145	9,771,071	636,159
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	5,106,261	4,349,221	713,851	43,189
9	Other employee benefits	11,129,784	9,479,713	1,555,935	94,136
10	Payroll taxes	5,934,196	5,054,408	829,596	50,192
а	Fees for services (non-employees) Management				
ь	Legal	441,500	52,980	388,520	
с	Accounting	196,110		196,110	
d	Lobbying	180,000		180,000	
e	Professional fundraising services See Part IV, line 17	328,755		,	328,755
f	Investment management fees	,			
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	4,809,742	3,573,398	1,236,344	
17	Travel	4,119,334		 	11,082
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	7,117,334	3,003,002	+33,230	11,002
19	Conferences, conventions, and meetings	896,896	842,710	54,186	
20	Interest	,	,	·	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,375,201	4,375,201		
23	Insurance	368,371	298,242	70,103	26
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	SUBCONTRACTS	17,880,729	17,880,631	98	
b	PRO FESSIO NAL SERVICES	8,474,125	7,497,830	508,881	467,414
c	OTHER OPERATING	6,805,921	6,150,975	554,570	100,376
d	SUPPLIES	6,235,990	5,683,310	538,173	14,507
е	DUES & FEES	5,390,170	4,726,586	164,671	498,913
f	All other expenses	14,365,899	12,863,129	952,779	549,991
25	Total functional expenses. Add lines 1 through 24f	179,942,962	158,066,384	19,081,838	2,794,740
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	•			· ·

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	•		2,482,500	1	1,397,101
	2	Savings and temporary cash investments			19,872,639	2	16,451,380
	3	Pledges and grants receivable, net			18,390,327	3	18,647,062
	4	Accounts receivable, net			3,763,485	4	3,643,376
	5	Receivables from current and former officers, directors, trustee highest compensated employees Complete Part II of	s, key	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$, and contributing esponsoring organizations of section $501(c)(9)$ voluntary emploorganizations (see instructions)					
- \$2		Schedule L				6	
ssets	7	Notes and loans receivable, net				7	
=	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			3,507,916	9	4,128,093
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	133,073,110			
	ь	Less accumulated depreciation	10b	48,261,378	83,123,275	10c	84,811,732
	11	Investments—publicly traded securities			50,710,448	11	57,855,178
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			181,850,590	16	186,933,922
	17	Accounts payable and accrued expenses .			16,863,167	17	14,684,719
	18	Grants payable				18	
	19	Deferred revenue			7,201,368	19	9,005,522
	20	Tax-exempt bond liabilities			44,788,137	20	43,803,651
es S	21	Escrow or custodial account liability Complete Part IV of Schedu	le D			21	
abilities	22	Payables to current and former officers, directors, trustees, kee employees, highest compensated employees, and disqualified					
Ē		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third partie	5 .		12,433,927	23	12,263,732
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			38,933,720	25	36,765,195
	26	Total liabilities. Add lines 17 through 25			120,220,319	26	116,522,819
٠,٠		Organizations that follow SFAS 117, check here ▶ ☐ and com	plete l	ines 27			
<u>9</u>		through 29, and lines 33 and 34.					
<u>8</u>	27	Unrestricted net assets				27	
Fund Balances	28	Temporarily restricted net assets				28	_
덛	29	Permanently restricted net assets				29	
or Fu		Organizations that do not follow SFAS 117, check here ► ✓ a lines 30 through 34.	nd con	nplete			
	30	Capital stock or trust principal, or current funds			28,082,186	30	34,138,103
šet	31	Paid-in or capital surplus, or land, building or equipment fund			28,901,108	31	31,589,182
Assets	32	Retained earnings, endowment, accumulated income, or other f	unds		4,646,977	32	4,683,818
Net	33	Total net assets or fund balances			61,630,271	33	70,411,103
Z	34	Total liabilities and net assets/fund balances			181,850,590	34	186,933,922
					1		

Par	Check if Schedule O contains a response to any question in this Part XI	•		.┏	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		184.0	025,47:
2	Total expenses (must equal Part IX, column (A), line 25)	2			942,962
3	Revenue less expenses Subtract line 2 from line 1	3		4,0	082,509
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		61,6	530,27:
5	Other changes in net assets or fund balances (explain in Schedule O)	5		4,6	598,323
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		70,4	11,103
Par	T XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			୮	T
1	Accounting method used to prepare the Form 990			Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were in a separate basis, consolidated basis, or both	ssued			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes	

Employer identification number

CESS AS F

SCHEDULE A (Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ. See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

SAN DIEGO STATE UNIVERSITY FOUNDATION DBA SDSU RESEARCH FOUNDATION 95-6042721 Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). 10 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h Type I **b** Type II c Type III - Functionally integrated Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (III) below, the governing body of the the supported organization? 11g(i) (ii) a family member of a person described in (i) above? 11g(ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organization in col (i) listed in your governing document?		Is the organization in col (i) listed in your governing		se of Is the organization in col (i) listed in your governing document?		Type of organization described on es 1 - 9 above Type of Is the organization in col (i) listed in your governing (v) Did you notify the organization in col (i) of your		Did you notify the Is the organization in col (i) of your col (i) organized		(vii) A mount of support	
		instructions))	Yes	No	Yes	No	Yes	No						
														
Total														

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1) (A)(vi)

(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	under Part III. If th	<u>ie organization</u>	fails to qualify u	inder the tests I	isted below, ple	ease co	mplete I	Part III.)
	ection A. Public Support endar year (or fiscal year beginning				1			
Care	in) 🟲	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2	010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do no include any "unusual grants")	t 67,277,91	1 68,406,485	71,939,174	79,289,199	86	,721,016	373,633,785
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3	67,277,91	1 68,406,485	71,939,174	79,289,199	86	,721,016	373,633,785
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public Support. Subtract line 5 from line 4							373,633,785
	ection B. Total Support							
Cale	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 20	10	(f) Total
7	A mounts from line 4	67,277,911	68,406,485	71,939,174	79,289,199	86	,721,016	373,633,785
8	Gross income from interest,	, ,	, ,	, ,	, ,			, ,
	dividends, payments received on securities loans, rents, royalties and income from similar sources	9,958,285	9,484,185	928,801	1,565,075	1	,822,125	23,758,471
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	445,268	306,034	290,112	243,163		284,049	1,568,626
11	Total support (Add lines 7 through 10)							398,960,882
12	Gross receipts from related activi		•			12		217,418,205
13	First Five Years If the Form 990 is check this box and stop here	s for the organizat	ıon's fırst, second	, thırd, fourth, or fı	ıfth tax year as a	501(c)(3	3) organız	zation, ►
	ection C. Computation of Pu							
14	Public Support Percentage for 201	•		11 column (f))		14		93 650 %
15	Public Support Percentage for 200	·	,			15		91 790 %
	33 1/3% support test—2010. If the and stop here. The organization question 33 1/3% support test—2009. If the	ualifies as a public	ly supported orga	nızatıon				▶ ▼
	box and stop here. The organization 10%-facts-and-circumstances tes	on qualifies as a p t— 2010. If the org	ublicly supported janization did not o	organization check a box on lin	e 13, 16a, or 16t	and line	e 14	► F
	is 10% or more, and if the organiz in Part IV how the organization me organization	eets the "facts and	d cırcumstances"	test The organiza	ation qualifies as	a publicl	y support	ted ▶厂
D	10%-facts-and-circumstances tes 15 is 10% or more, and if the orga Explain in Part IV how the organiz supported organization	anızatıon meets th	ne "facts and circu	mstances" test, o	heck this box an	d stop h e	ere.	▶ □
18	Private Foundation If the organizations	ition did not checl	k a box on line 13,	16a, 16b, 17a or	17b, check this	box and	see	▶ □

Schedule A (Form 990 or 990-EZ) 2010 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified **b** A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning **(e)** 2010 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (f) Total ın) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b c Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16	Public support percentage from 2009 Schedule A, Part III, line 15	16	
S	ection D. Computation of Investment Income Percentage		
17	Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17	
18	Investment income percentage from 2009 Schedule A , Part III, line 17	18	

19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Fo	orm 990 or 990-EZ) 2010	Pag
Part IV	Supplemental Information. Supplemental Information. Complete this required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. additional information. (See instructions).	•

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

Software ID: Software Version:

EIN: 95-6042721

Name: SAN DIEGO STATE UNIVERSITY FOUNDATION

DBA SDSU RESEARCH FOUNDATION

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours	Posi	(C tion (hat a	che	cka			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei		Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
DEBRA K KELLEY DIRECTOR	1 00	x						0	0	0
KAREN D EMMOREY SEC-RESRCH-FAC	30 00	Х		х				80,122	101,631	51,297
BRIAN K FINCH RESEARCH-FACULTY	30 00	Х						64,187	94,763	46,663
THOMAS R SCOTT VICE PRESIDENT	5 00	Х		х				0	193,729	53,503
STEPHEN L WEBER PRESIDENT	5 00	Х		х				0	284,358	89,358
SALLY F ROUSH TREASURER	5 00	Х		x				0	218,423	57,186
NANCY A MARLIN DIRECTOR	5 00	Х						0	238,170	61,518
SANFORD I BERNSTEIN RESEARCH-FACULTY	30 00	Х						36,620	108,189	48,696
WALTER A TURNER JR DIRECTOR	2 00	Х						0	0	0
KIM E BARRETT DIRECTOR	1 00	Х						0	0	0
MARY ANN LYMAN-HAGER RESEARCH-FACULTY	30 00	Х						72,963	104,863	47,283
ROBERTA GOTTLIEB RESEARCH-FACULTY	30 00	Х						100,034	185,740	56,017
ELIZABETH A KLONOFF RESEARCH-FACULTY	30 00	Х						74,716	135,120	47,048
GRANT A MACK DIRECTOR	1 00	Х						0	0	0
MARILYN NEWHOFF DIRECTOR-DEAN	1 00	Х						0	193,136	51,781
PAULA S BROCK DIRECTOR	1 00	Х						0	0	0
MELINDA S COIL CFO	50 00			х				153,930	0	33,126
DAN M GILBREATH EXECUTIVE DIRECTOR	40 00			х				174,045	0	29,930
WILLIAM T HUSHEN ASSOC EXEC DIRECTOR	40 00				х			159,568	0	29,332
MICHELE GOETZ ASSOC EXEC DIRECTOR	50 00				х			154,494	0	29,058
THOMAS KARLO GENERAL MANAGER - KPBS	50 00				х			10,000	193,517	58,337
NORMA CLARK ASSOC EXEC DIRECTOR	50 00				х			137,083	0	18,517
JOHN ELDER RESEARCH-FACULTY	36 00					Х		160,829	177,172	69,545
STEPHEN FISHER COACH	40 00					Х		423,829	233,769	63,652
EDWARD RILEY RESEARCH-FACULTY	36 00					Х		136,625	193,354	68,526

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) A verage hours	Posi t	((tion (hat a	che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other	
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
MELBOURNE HOVELL RESEARCH-FACULTY	36 00					Х		127,424	147,783	61,515	
BRADY HOKE COACH	40 00					x		476,458	199,427	60,874	
GENE G LAMKE OFFICER RESEARCH-FACULTY - FORMER	0 00						х	0	50,053	110	
GAIL K NAUGHTON DIRECTOR RESEARCH-DEAN - FORMER	30 00						х	78,432	185,182	64,245	
JAMES R KITCHEN DIRECTOR-VP SDSU - FORMER	0 00						Х	0	189,934	58,430	
DIPAK K GUPTA DIRECTOR RESEARCH-FACULTY - FORMER	10 00						х	6,513	101,959	32,039	

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DLN: 93493080004172

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts FA and C below. Do not complete Part FB

	, , ,	or(o)(o)) organizations complete rai	to 17 t and 0 bolov	. Bonocooniploto raitin	_		
	ection 527 organizations Complete						
		s," to Form 990, Part IV, Line 4, or					
	. , , ,	have filed Form 5768 (election under	, ,,	•	•		_
	· / · /	t have NOT filed Form 5768 (election u	,	• •			
	-	s," to Form 990, Part IV, Line 5 (Pr	oxy Tax) or Forr	n 990-EZ, Part V, line 3	5a (Proxy T	ax), the	n
	ection 501(c)(4), (5), or (6) organiz	zations Complete Part III		T			
	ime of the organization N DIEGO STATE UNIVERSITY FOUNDATIO	ON		Employer ide	entification	number	
	A SDSU RESEARCH FOUNDATION	,		95-604272	1		
Par	t I-A Complete if the or	ganization is exempt under	section 501(c			zation	
1	Provide a description of the org	ganızatıon's dırect and ındırect politic	cal campaign acti	vities in Part IV			
2	Political expenditures			▶	\$		
3	V olunteer hours						
Par	Complete if the or	ganization is exempt under s	section 501(c	:)(3).			
1		tax incurred by the organization und		<u></u>	\$		
2	Enter the amount of any excise	e tax incurred by organization manage	ers under section	4955 ▶	\$		
3	If the organization incurred a s		Г	Yes	∏ No		
4a	Was a correction made?				Γ	Yes	∏ No
ь	If "Yes," describe in Part IV						
Par	t I-C Complete if the or	ganization is exempt under :	section 501(c	e) except section 50	01(c)(3).		
1	Enter the amount directly expe	ended by the filing organization for se	ction 527 exemp	t function activities 🕨	\$		
2	-	rganızatıon's funds contributed to ot	her organızatıons	for section 527			
	exempt funtion activities			•	\$		
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	and on Form 1120	D-POL, line 17b	\$		
4	Did the filing organization file F	Form 1120-POL for this year?			Γ	Yes	┌ No
5	organization made payments F amount of political contribution	nd employer identification number (E) For each organization listed, enter the ns received that were promptly and di political action committee (PAC) If	e amount paid fro irectly delivered t	m the filing organization's to a separate political org	s funds Als ganızatıon,	o enter i such as	the
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0	contrib	ount of p utions re promptly deliver	eceived and

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Sc	hedule C (Form 990 or 990-EZ) 2010						Page 2
P	art II-A Complete if the organization under section 501(h)).	is ex	cempt under	section 501(c)(3) and fi	led Form 5768	
A B	Check If the filing organization belongs to a Check If the filing organization checked bo			" provisions apply	/		
	Limits on Lobbying E (The term "expenditures" means a)		(a) Filing Organization's Totals	(b) Affiliated Group Totals
<u>1</u> a	Total lobbying expenditures to influence public o	pinion	(grass roots lob	oyıng)			
b	Total lobbying expenditures to influence a legisl	atıve b	ody (direct lobby	ıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)					
d	Other exempt purpose expenditures						
е	Total exempt purpose expenditures (add lines 1	c and :	Ld)				
f	Lobbying nontaxable amount Enter the amount columns	from th	e following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The	lobbying nontaxa	ble amount is:			
	Not over \$500,000	20%	of the amount on lin	e 1e			
	Over \$500,000 but not over \$1,000,000	\$100	,000 plus 15% of the	excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175	,000 plus 10% of the	excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225	,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000	\$1,00	00,000				
	Grassroots nontaxable amount (enter 25% of lir	ne 1 f)					
_	Subtract line 1g from line 1a If zero or less, ent	-					
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -					
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h d	or line 11, did the	organization file F	orm 4720 rep	orting	┌ Yes ┌ No
	4-Year Av (Some organizations that made a columns below. See t	secti	on 501(h) ele		havè to co		ne five
	Lobbying Exp	endit	ures During 4	l-Year Averag	jing Period		
	Calendar year (or fiscal year						

	Lobbying Expenditures During 4-Year Averaging Period								
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total			
2a	Lobbying non-taxable amount								
b	Lobbying ceiling amount (150% of line 2a, column(e))								
С	Total lobbying expenditures								
d	Grassroots non-taxable amount								
e	Grassroots ceiling amount (150% of line 2d, column (e))								
f	Grassroots lobbying expenditures								

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768
	(election under section 501(h)).

		(a)		(b)
		Yes	No	A mount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
c	Media advertisements?		Νo	
d	Mailings to members, legislators, or the public?		Νo	
е	Publications, or published or broadcast statements?		Νo	
f	Grants to other organizations for lobbying purposes?		Νo	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		180,000
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo	
i	Other activities? If "Yes," describe in Part IV		Νo	
j	Total lines 1c through 1i			180,000
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
L	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

2	
а	
Ь	
С	
3	
4	
5	
5	

Part IV Supplemental Information

Dues, assessments and similar amounts from members

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Ident if ier	Return Reference	Explanation
EXPLANATION OF OTHER LOBBYING ACTIVITIES	,	SDSU RESEARCH FOUNDATION PAID \$180,000 TO THE FIRM OF CARPI & CLAY, INC DURING THE FISCAL YEAR THE FIRM REPRESENTS SDSU'S INTERESTS IN WASHINGTON, D C , PRIMARILY IN ACTIVITIES THAT INVOLVE THE COMPETITION FOR FEDERAL RESEARCH FUNDS

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DLN: 93493080004172

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Internal Revenue Service ► Attach to Form 990. ► See separate instructions. Name of the organization **Employer identification number** SAN DIEGO STATE UNIVERSITY FOUNDATION DBA SDSU RESEARCH FOUNDATION 95-6042721 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised □ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🛌 Number of states where property subject to conservation easement is located -Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🕨 A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ ___ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

following amounts required to be reported under SFAS 116 relating to these items

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

Revenues included in Form 990, Part VIII, line 1

Schedule D (Form 990) 2010

Sche	dule D (Form 990) 2010									Page 2
Par	Organizations Maintaining Co	llections of Art,	His	torical Tre	eası	ıres, or Othe	r Simila	r Asse	ts (co	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of th	e following th	nat ai	re a significant i	ise of its co	ollection	า	
а	Public exhibition		d	┌ Loan o	rexc	hange programs	;			
b	Scholarly research		e	┌ Other						
С	Preservation for future generations									
4	Provide a description of the organization's co Part XIV	ollections and explain	n how	they further	the	organization's ex	xempt purp	ose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t			•			nılar	Γ	Yes	┌ No
Pai	Part IV, line 9, or reported an an					n answered "Y	es" to Fo	rm 990),	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other intermed	diary	for contribut	ions	or other assets	not	Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the fo	ollowi	ng table						
								A mou	ınt	
С.	Beginning balance					1c				
d	Additions during the year					1d				
e	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?					Γ	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV									
Pa	rt V Endowment Funds. Complete	f the organization (a)Current Year		wered "Yes Prior Year			rt IV, line d)Three Years		NEQUE V	ears Back
1a	Beginning of year balance	16,178,017	(D)	14,628,436		17,802,288	a)Tillee Tears	s back (e	e)rour t	ears back
b	Contributions	414,893		680,794		315,805				
c	Investment earnings or losses	2,589,907		1,575,200		-2,600,433				
d	Grants or scholarships									
e	Other expenditures for facilities and programs	362,441		706,413		889,224				
f	Administrative expenses									
g	End of year balance	18,820,376		16,178,017		14,628,436				
2	Provide the estimated percentage of the yea	r end balance held as	5							
а	Board designated or quasi-endowment 🕨	69 000 %								
ь	Permanent endowment 🕨 23 000 %									
c	Term endowment ▶ 8 000 %									
3a	Are there endowment funds not in the posses	ssion of the organiza	tıon t	hat are held	and a	admınıstered for	the			
	organization by								Yes	No
	(i) unrelated organizations				•			3a(i)		No
ь	(ii) related organizations			chodulo P2	•			3a(ii) 3b	 	No I
4	Describe in Part XIV the intended uses of th	•			•			30		<u></u>
Par	t VI Investments—Land, Buildings				0. P	art X, line 10.				
	Description of investment			(a) Cost or o basis (investm	ther	(b)Cost or other basis (other)	(c) Accumi deprecial		(d) Bo	ok value
1a	Land			475	5,302	22,204,975			2	2,680,277
	Buildings				,852	84,223,836		38,437		4,311,251
	Leasehold improvements					, ,	,			. ,
	Equipment					24,086,924	17,8	22,941		6,263,983
	Other		•			1,556,221				1,556,221
	I. Add lines 1a-1e (Column (d) should equal Fo		n (B),	line 10(c).)			· .	$\overline{}$		4,811,732
		· · · · · · · · · · · · · · · · · · ·					Sched	lule D (I	Form 9	90) 201

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12	2.	
(a) Description of security or category	(b)Book value		d of valuation
(including name of security)	(B)Book value	Cost or end-o	f-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Other			
	+	+	
	1		
Table (California (b) abouted a result forms 0000 Part V and (0) to a 12)			_
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See	Form 990, Part X, line :	13.	
(a) Description of investment type	(b) Book value		d of valuation
(a) Description of investment type	(b) Book value	Cost or end-o	f-year market value
			_
	1		
	+	+	
	-		
	 		
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, In	ıe 15.		
(a) Descrip	tion		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)		
		<u> </u>	
Part X Other Liabilities. See Form 990, Part X	, line 25.		
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes			
AMOUNTS HELD FOR OTHERS	567,297		
DUE TO SDSU AUXILIARY	33,283,133		
OTHER LIABILITIES	2,914,765		
Total (Column (h) charled agreed Form 2000, Part V. 1/50 1 25			
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	36,765,195		

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	184,025,47
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	179,942,96
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	4,082,50
4	Net unrealized gains (losses) on investments	4	1,933,03
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	2,765,29
9	Total adjustments (net) Add lines 4 - 8	9	4,698,32
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	8,780,83
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Retu	rn
1	Total revenue, gains, and other support per audited financial statements	1	198,290,95
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	14,265,48
3	Subtract line 2e from line 1	3	184,025,47
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	184,025,47
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per Re	
1	Total expenses and losses per audited financial statements	1	189,510,12
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV)	1	
e	Add lines 2a through 2d	2e	12,332,44
3	Subtract line 2e from line 1	3	177,177,67
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a]	
b	Other (Describe in Part XIV)]	
c	Add lines 4a and 4b	4c	2,765,29
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	179,942,96

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	INTENDED USES OF ENDOWMENT FUND TO PROVIDE INTER-GENERATIONAL INCOME TO AUGMENT PROGRAMS THAT ARE AN INTEGRAL PART OF THE RESEARCH, EDUCATIONAL AND COMMUNITY SERVICE MISSION OF SAN DIEGO STATE UNIVERSITY
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	UNCERTAIN TAX POSITIONS UNDER ASC 740 (FIN 48) SDSU RESEARCH FOUNDATION HAS ADOPTED CERTAIN PROVISIONS OF ASC 740 (FIN 48), ACCOUNTING FOR INCOME TAXES SDSURF HAS REVIEWED ITS TAX POSITION FOR ALL OPEN TAX YEARS AND CONCLUDED THAT THE ADOPTION OF THE PROVISIONS OF ASC 740 (FIN 48) DID NOT HAVE AN IMPACT ON THE FINANCIAL STATEMENT POSITION
PART XI, LINE 8 - OTHER ADJUSTMENTS		INCREASE IN EQUITY OF PLANT FUND ASSETS 2,765,290
PART XII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSES NETTED ON TAX RETURN 11,502,958 IN KIND DONATIONS EXCLUDED ON TAX RETURN 829,490
PART XIII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSES NETTED ON TAX RETURN 11,502,958 IN KIND DONATIONS EXCLUDED ON TAX RETURN 829,490
PART XIII, LINE 4B - OTHER ADJUSTMENTS		INCREASE IN EQUITY OF PLANT FUND ASSETS 2,765,290

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DLN: 93493080004172

OMB No 1545-0047

2010

Open to Public **Inspection**

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

Statement of Activities Outside the United States

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization SAN DIEGO STATE UNIVERSITY FOUNDATION DBA SDSU RESEARCH FOUNDATION

Employer identification number

95-6042721

Part I	General Information on Activities Outside the United Stat	es. Complete if the organization answered
	"Yes" to Form 990, Part IV, line 14b.	

Pa	rt I General Informatio "Yes" to Form 990, Pa			he United States. C	Complete if the organiza	ation answered
1	For grantmakers. Does the assistance, the grantees' eli the grants or assistance? .	organization r gibility for the	naıntaın record grants or assı	stance, and the select	cion criteria used to awa	rd
2	For grant makers. Describe in Pa United States	art V the organi	zation's procedu	res for monitoring the us	e of grant funds outside th	е
3	Activites per Region (Use Part	V ıf addıtıonal s	pace is needed)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	region (by type) (e g ,	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	EAST ASIA & THE PACIFIC	0	0	GRANTS		9,780
	CENTRAL AMERICA & CARIBBEAN	0	0	GRANTS		3,300
	EUROPE	0	0	GRANTS		7,587
	MIDDLE EAST & NO AFRICA	0	0	GRANTS		35,983
	NORTH AMERICA	0	0	GRANTS		24,977
	RUSSIA	0	0	GRANTS		933
	SOUTH AMERICA	0	0	GRANTS		18,165
	SUB SAHARAN AFRICA	0	0	GRANTS		4,400
	EUROPE	0	18	PRO GRA M	TEACHING	543,111
	EAST ASIA & THE PACIFIC	0	5		TECHNICAL ASSISTANCE	100,950
	Sub-total		0			105,125
b	Total from continuation sheets to Part I		23			644,061

c Totals (add lines 3a and 3b)

749,186

1	(a) Name of organization	(b) IRS code section and EIN (if	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV,
	<u> </u>	applicable)							appraisal, other
			MIDDLE EAST	TRAVEL ASSISTANCE	24,983	WIRE			
	-								
2	Enter total nu tax-exempt b	mber of recipie y the IRS, or fo	ent organizations li or which the grant	sted above that are se or counsel has pro	recognized as charit ovided a section 501	ties by the foreign on the contract (c)(3) equivalency	country, recognized letter	as . 🕨	0
3	Enter total nu	mber of other	organizations or e	ntities				. ▶	1
_									F (Form 990) 2010

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other
воокѕ	CENTRAL AMERICA	3	3,300	CHECK	1		FFF
воокѕ	EAST ASIA	5	5,395	CHECK	†		
воокѕ	EUROPE	4	3,405	CHECK	+		
	MID EAST & NO AFRICA	10	11,000	CHECK			
	SOUTH AMERICA	11	12,100	CHECK	1		
	SUB-SAHARAN AFRICA	4	4,400	CHECK			
TRAVEL ASSISTANCE		3	4,385	WIRE	1		
TRAVEL ASSISTANCE	EUROPE	6	4,182	CHECK	†		
TRAVEL ASSISTANCE	NORTH AMERICA	12	24,977	CHECK	†		
TRAVEL ASSISTANCE	RUSSIA	1	933	WIRE	 		
TRAVEL ASSISTANCE	SOUTH AMERICA	2	2,028	WIRE	+		
TRAVEL ASSISTANCE	SOUTH AMERICA	3	4,037	CHECK			
1				,			
1				'			
			-	,	1		

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	⊽	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Γ	Yes	r	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	r	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	্	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	⊽	Νo

Schedule F (Form 990) 2010

Part V Supplemental Information

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

ldentifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 EXPLANATION FOR GRANTS OUTSIDE US FOREIGN AND DOMESTIC EXPENDITURES ON GRANTS AND CONTRACTS ARE CLOSELY MONITORED BY SDSU RESEARCH FOUNDATION STAFF TO COMPLY WITH SPONSOR REQUIREMENTS FEDERAL GRANTS REPRESENT A SUBSTANTIAL MAJORITY OF GRANT AND CONTRACT EXPENDITURES AND ACCORDINGLY, ARE SUBJECT TO AUDIT BY THE DEPARTMENT OF HEALTH AND HUMAN SERVICES, THE COGNIZANT GOVERNMENT AUDIT AGENCY FOR SDSU REASEARCH FOUNDATION

Schedule F (Form 990) 2010

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As Filed Data -

DLN: 93493080004172

OMB No 1545-0047

2010

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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ. See separate instructions.

Supplemental Information Regarding

Fundraising or Gaming Activities

Open to Public Inspection

Name of the organization SAN DIEGO STATE UNIVERSITY FOUNDATION DBA SDSU RESEARCH FOUNDATION Employer identification number

95-6042721

Part I	Fundraising Activities.	Complete if the	organization answered '	"Yes" to	Form 990,	Part IV, line 17.
--------	-------------------------	-----------------	-------------------------	----------	-----------	-------------------

- Indicate whether the organization raised funds through any of the following activities. Check all that apply
- a Mail solicitations
- b Internet and e-mail solicitations
- c 🔽 Phone solicitations
- d 🔽 In-person solicitations

- e 🔽 Solicitation of non-government grants
- f 🔽 Solicitation of government grants
- g 🔽 Special fundraising events
- or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

 b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization Form 990-EZ filers are not required to complete this table

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees

(i) Name and address of ındıvıdual or entity (fundraiser)	(ii) Activity	(iii) DId fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No																							
CHARITABLE AUTO RESOURCES INC 4669 MURPHY CANYON ROAD 100 SAN DIEGO, CA 92123	CAR DONATIONS	Yes		1,148,571	300,502	848,069																				
ARIA COMMUNICATIONS INC 717 W ST GERMAI ST CLOUD, MN 56301	TELEFUNDRAISING		Νο	65,921	28,253	37,668																				
Total			•	1,214,492	328,755	885,737																				

³ List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

CA

Pa	rt II	Fundraising Events. Commore than \$15,000 on Form				
			(a) Event #1 ANIVERS GALA (event type)	(b) Event #2 GOLF TOURNAMENT (event type)	(c) O ther Events (total number)	(d) Total Events (Add col (a) through col (c))
₽	1	Gross receipts	201,747	26,365		228,112
Revenue	2	Less Charitable contributions	42,545	25,865		68,410
<u>~</u>	3	Gross income (line 1 minus line 2)	159,202	500		159,702
	4	Cash prizes				
မွ	5	Non-cash prizes				
Expenses	6	Rent/facility costs	26,461	37,413		63,874
	7	Food and beverages				
Direct Direct	8	Entertainment				
Δ	9	Other direct expenses .	151,660	32,589		184,249
	10	Direct expense summary Add lin	es 4 through 9 in column	(d)	•	248,123
	11	Net income summary Combine li				-88,421
Par	t III	Gaming. Complete if the oil \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or rep	orted more than
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Total gaming (Add col (a) through col (c))
	1	Gross revenue				
Ses	2	Cash prizes				
Expenses	3	Non-cash prizes				
	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	Volunteer labor	Г Yes % Г No	Γ Yes % Γ No	☐ Yes % ☐ No	
	7	Direct expense summary Add line	s 2 through 5 ın column (d)		
	8	Net gaming income summary Com	nbine lines 1 and 7 in colu	ımn (d)	<u> </u>	
9 a b	Is t	er the state(s) in which the organiza the organization licensed to operate No," Explain	gaming activities in each			· · Fyes Fno
10a b		re any of the organization's gaming Yes," Explain			the tax year?	· · Fyes Fno

11	Does the organization operate ga	aming activities with nonmembers?		Г үе	s Γ_{No}
12	Is the organization a grantor, be	neficiary or trustee of a trust or a mer	nber of a partnership or other entity		
	formed to administer charitable (jaming?		Г _{Yе}	s Γ_{No}
13	Indicate the percentage of gamin	ng activity operated in			
а	The organization's facility			1	
b	An outside facility			,	
14	Provide the name and address or records	f the person who prepares the organız	ation's gaming/special events books and	d	
	Name 🟲				
	Address 🟲				
15a		ntract with a third party from whom th		_	_
					s No
ь		ning revenue received by the organizated by the third party 🟲 \$	ation > \$ and the		
c	If "Yes," enter name and address	5			
	Name 🟲				
	Address 🟲				
16	Gaming manager information				
	Name 🟲				
	Gaming manager compensation l	* \$			
	Description of services provided	>			
	Director/officer	Employee	Independent contractor		
17	Mandatory distributions				
а		er state law to make charitable distrib		_	_
p.				· Ye	s No
D		required under state law distributed activities during the tax year - \$	to other exempt organizations or spent		
Par		<u>-</u>	r responses to question on Schedul	e G (see	
	Identifier	ReturnReference	Explanation		

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DLN: 93493080004172 OMB No 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule I

(Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

Open to Public **Inspection**

SAN DIEGO STATE UNIVERSITY FO DBA SDSU RESEARCH FOUNDATIO	N					95-6042721	
Part I General Informatio							
Does the organization maintain i the selection criteria used to aw	ard the grants or ass	sistance?					∀ Yes
2 Describe in Part IV the organiza	·	<u> </u>					
Part II Grants and Other As Form 990, Part IV, line duplicated if additional	e 21 for any recipi	ent that received n	nore than \$5,000. Ch	eck this box if no one	recipient receive	ed more than \$5,000	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
	1						
2 Enter total number of section 503 Enter total number of other orga		_				<u>*</u> _	
For Privacy Act and Paperwork Reduction				Cat No 50055P		Schedu	le I (Form 990) 2010

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) BOOKS & SUPPLIES	450	419,400			
(2) FELLO WSHIPS	1150	6,504,292			
(3) OTHER STUDENTS COSTS	150	103,008			
(4) TRAVEL ASSISTANCE	450	374,488			

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Ident if ier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	<u> </u>	SCHEDULE I, PART I, LINE 2 DESCRIPTION OF PROCEDURES FOR MONITORING GRANT USAGE FELLOWSHIPS ARE PRIMARILY GRANTED TO INDIVIDUALS TO HELP THEM IMPROVE THEIR RESEARCH SKILLS AS SUCH, THE RESPONSIBLE PRINCIPAL INVESTIGATOR CLOSELY MONITORS THE PROGRESS OF THE RECIPIENTS

Schedule I (Form 990) 2010

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**Compensation Information**

DLN: 93493080004172

Employer identification number

95-6042721

OMB No 1545-0047

Open to Public Inspection

Schedule J

Department of the Treasury

Internal Revenue Service

(Form 990)

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Name of the organization SAN DIEGO STATE UNIVERSITY FOUNDATION

DBA SDSU RESEARCH FOUNDATION

Рa	Questions Regarding Compensation				
				Yes	Νo
1a	11 1 1 1	vided any of the following to or for a person listed in Form to provide any relevant information regarding these items			
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the orgreimbursement orprovision of all the expenses descr	ganization follow a written policy regarding payment or ubed above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to re				
	officers, directors, trustees, and the CEO/Executive	Director, regarding the items checked in line 1a.	2		
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all th	·			
	Compensation committee	Written employment contract			
	Independent compensation consultant	Compensation survey or study			
	Form 990 of other organizations	A pproval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Por a related organization	Part VII, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control p	payment from the organization or a related organization?	4a		Νo
b	Participate in, or receive payment from, a supplemen	ital nonqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-ba	sed compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pro	ovide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mus	st complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	line 1a, did the organization pay or accrue any			
а	The organization?		5a		Νo
b	Any related organization?		5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a, did the organization pay or accrue any			
а	The organization?		6a		Νo
b	Any related organization?		6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," d		7		Νo
8	Were any amounts reported in Form 990, Part VII, p				
	subject to the initial contract exception described in in Part III	Regs section 53 4958-4(a)(3)? If "Yes," describe			
			8		No
9	If "Yes" to line 8, did the organization also follow the section 53 4958-6(c)?	rebuttable presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name	(B) Breakdown of	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
See Additional Data Table							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							

Schedule J (Form 990) 2010 Page **3**

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier Return Reference Explanation

Schedule J (Form 990) 2010

Software ID: Software Version:

EIN: 95-6042721

Name: SAN DIEGO STATE UNIVERSITY FOUNDATION

DBA SDSU RESEARCH FOUNDATION

Form 990, Schedule J, Pa	rt I	I - Officers, Direc	tors, Trustees, Ke	y Employees, and	Highest Compens	sated Employees		
(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation (C) Deferred (D) N					(E) Total of columns	(F) Compensation
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
KAREN D EMMOREY	(i)	80,122 101,631	0	0	8,012 18,788	0 24,497	88,134 144,916	0
BRIAN K FINCH	(I) (II)	64,187 94,763	0	0	6,419	0 22,749	70,606	0
THOMAS R SCOTT	(I) (II)	0 193,729	0	0	0 35,838	0 17,665	0	0
STEPHEN L WEBER	(I) (II)	0 284,358	0	0	0 52,604	0 36,754	0	0
SALLY F ROUSH	(I) (II)	0 218,423	0	0	0 40,406	0 16,780	0	0
NANCY A MARLIN	(I) (II)	238,170	0	0	0 43,822	0 17,696	0 299,688	0
SANFORD I BERNSTEIN	(I) (II)	36,620 108,189	0	0	3,662 20,011	0 25,023	40,282 153,223	0
MARY ANN LYMAN- HAGER	(I) (II)	72,963 104,863	0	0	7,296 19,392	0 20,595	80,259	0
ROBERTA GOTTLIEB	(I) (II)	100,034 185,740	0	0	10,003 32,500	0 13,514	110,037 231,754	0
ELIZABETH A KLONOFF	(ı) (ıı)	74,716 135,120	0	0	7,472 24,452	0 15,124	82,188 174,696	0
MARILYN NEWHOFF	(I) (II)	0 193,136	0	0	0 35,437	0	0 244,917	0
MELINDA S COIL	(I) (II)	153,930	0	0	15,556	17,570	İ	0
DAN M GILBREATH	(I) (II)	174,045	0	0	17,000	12,930	203,975	0
WILLIAM T HUSHEN	(ı) (ıı)	159,568 0	0	0	16,311	13,021	188,900	0
MICHELE GOETZ	(ı) (ıı)	154,494 0	0	0	15,556	13,502	183,552	0
THOMAS KARLO	(I) (II)	10,000 193,517	0	0	0 35,968	0 22,369	10,000 251,854	0
JOHN ELDER	(I) (II)	160,829 177,172	0	0		0 22,510	176,912	0
STEPHEN FISHER	(ı) (ıı)	423,829 233,769	0	0		0 25,170	423,829	0
EDWARD RILEY	(ı) (ıı)	136,625 193,354	0	0	13,662 32,800	0 22,064	150,287 248,218	0
MELBOURNE HOVELL	(I) (II)	127,424 147,783	0	0		0 21,444	140,166 196,556	0
BRADY HOKE	(I) (II)	476,458 199,427	0	0	0 36,893	0 23,981	476,458 260,301	0
GENE G LAMKE	(I) (II)	0 50,053	0	0	0	0	0 50,163	0
GAIL K NAUGHTON	(ı) (ıı)	78,432 185,182	0	0	7,843 34,257	0 22,145	86,275 241,584	0
JAMES R KITCHEN	(ı) (ıı)	0 189,934	0	0	0 35,136	0 23,294	0 248,364	0
DIPAK K GUPTA	(I) (II)	6,513 101,959	0	0	0	0 18,592	6,513	0

DLN: 93493080004172

OMB No 1545-0047

2010

Open to Public
Inspection

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule 0 (Form 990).
 ► Attach to Form 990.
 ► See separate instructions.

Department of the Treasury Internal Revenue Service Name of the organization

SAN DIEGO STATE UNIVERSITY FOUNDATION

DBA SDSU RESEARCH FOUNDATION

Employer identification number

95-6042721

DDA	SDSU RESEARCH FOUNDATI	ON												
Pā	rt I Bond Issues													
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue P	rıce	(f) Descripti	on of Purpose	(g) De	feased	Beh	On alf of uer		Pool ncing
									Yes	No	Yes	No	Yes	No
A	TRUSTEES CALIF STATE UNIVERSITY	94-6001347	13077CUP7	04-06-2010	160,852		REFUND 1998 BONDS	& 1999		Х		Х	Х	
_									-				 	
		-							-				 	
Pa	rt II Proceeds								1					1
					А			В		С			D	
1	A mount of bonds retired				1	1,020,0	000							
2	A mount of bonds legally defe	ased												
3	Total proceeds of issue				1	2,048,0	084							
4	Gross proceeds in reserve fu	nds												
5	Capitalized interest from proc	ceeds												
6	Proceeds in refunding escrow	ı			11,958,009									
7	Issuance costs from proceed	ls				90,0	075							
8	Credit enhancement from pro	ceeds												
9	Working capital expenditures	from proceeds												
10	Capital expenditures from pro	oceeds												
11	Other spent proceeds													
12	Other unspent proceeds													
13	Year of substantial completio	n												
					Yes	No	Yes	No	Yes		No	Yes		No
14	Were the bonds issued as par	rt of a current refund	ing issue?		x									
15	Were the bonds issued as par	rt of an advance refu	ndıng ıssue?			Х								
16	Has the final allocation of pro	ceeds been made?			Х									
17	Does the organization mainta allocation of proceeds?	ıın adequate books a	nd records to supp	oort the final	х									
Pai	t IIII Private Business l	Use												
					A			B		<u>C</u>			D	
					Yes	No	Yes	No	Yes		No	Yes		No

property financed by tax-exempt bonds?

financed property?

Was the organization a partner in a partnership, or a member of an LLC, which owned

Are there any lease arrangements that may result in private business use of bond-

Χ

Part III Private Business Use (Continued)

1 4	111 Trivate basiness ese (continued)		A		В		 С	1	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		х						
b	Are there any research agreements that may result in private business use of bond-financed property?		х						
С	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?		х						
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %						
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		0 %						
6	Total of lines 4 and 5		0 %						
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	Х							
Da	rt TV Arbitrago								

		Α		В		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		x						
2	Is the bond issue a variable rate issue?		Х						
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		х						
ь	Name of provider		1		1		•		
С	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		Х						
ь	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		х						
6	Did the bond issue qualify for an exception to rebate?		х						

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Ident if ier	Return Reference	Explanat ion

SCHEDULE M (Form 990)

NonCash Contributions

OMB No 1545-0047

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Department of the Treasury Internal Revenue Service

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

Name of the organization SAN DIEGO STATE UNIVERSITY FOUNDATION **Employer identification number**

DDA 3	BUSU RESEARCH FOUNDATION				95-6042721		
Pa	rt I Types of Property						
		(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d Method of determining of amounts		tion
_	Art—Works of art Art—Historical treasures Art—Fractional interests			*9			
4	Books and publications						
	Clothing and household						
good							
6	Cars and other vehicles .	X	1,300	1,148,571	SELLING PRICE		
7	Boats and planes						
8	Intellectual property						
	Securities—Publicly traded	Х	13	26,058	SELLING PRICE		
	Securities—Closely held stock						
	Securities—Partnership, LLC, or trust interests .						
	Securities—Miscellaneous						
	Qualified conservation contribution—Historic structures						
14	Qualified conservation contribution—Other						
15	Real estate—Residential .						
16	Real estate—Commercial						
17	Real estate—Other						
18	Collectibles						
19							
20	Food inventory Drugs and medical supplies						
	Taxidermy						
23	Scientific specimens						
	Archeological artifacts AUCTION Other ► (ITEMS)	х	72	129.206	SELLING PRICE		
	Other ►()			,			
27	Other ►()						
28	Other ► ()						
29	Number of Forms 8283 received b	v the ora	anization during the tax vea	ar for contributions			
	for which the organization complete		=		29		
						Yes	No
30a	During the year, did the organization	on receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it		
	must hold for at least three years f	rom the o	date of the initial contribution	on, and which is not require	d to be used		
	for exempt purposes for the entire					30a	No
ь	If "Yes," describe the arrangement	t in Part I	I				
31	Does the organization have a gift a			eview of any non-standard	contributions?	31 Yes	
32a	Does the organization hire or use t		es or related organizations	to solicit, process, or sell	non-cash	325 1	
	If "Yes," describe in Part II If the organization did not report re		n column (c) for a type of p	roperty for which column (a) is checked	32a Yes	
	describe in Part II	venues I	n corumni (c) for a type of pi	Toperty for which column (a	, is checked,		

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Ident if ier	Return Reference	Explanation
THIRD PARTY USE	,	HIRE AND USE OF THIRD PARTIES ALSO SEE SCHEDULE G KPBS CONDUCTS A VEHICLE DONATION PROGRAM WITH THE ASSISTANCE OF CHARITABLE AUTO RESOURCES, INC

Schedule M (Form 990) 2010

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As Filed Data -

DLN: 93493080004172

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990 or 990-EZ.

2010

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SAN DIEGO STATE UNIVERSITY FOUNDATION	Employer Identification number
DBA SDSU RESEARCH FOUNDATION	95-6042721

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		HOW MEMBERS OR SHAREHOLDERS ELECT GOVERNING BODY THE PRESIDENT OF SAN DIEGO STATE UNIVERSITY IS ALSO EX OFFICIO THE PRESIDENT AND A VOTING MEMBER OF THE BOARD OF DIRECTORS OF SDSU RESEARCH FOUNDATION FOUR OTHER SDSURF DIRECTORS ARE APPOINTED EX OFFICIO BY VIRTUE OF THEIR POSITIONS IN THE UNIVERSITY, AND ALL ELECTED DIRECTORS ARE NOMINATED BY THE PRESIDENT

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B		DECISIONS OF GOVERNING BODY APPROVAL BY MEMBERS OR SHAREHOLDERS UNDER TITLE 5 CALIF CODE OF REGS SECTION 42402, THE CAMPUS PRESIDENT IS REQUIRED TO ASSURE THAT SDSURF OPERATES IN CONFORMITY WITH POLICIES OF THE CALIFORNIA STATE UNIVERSITY AND OF SAN DIEGO STATE UNIVERSITY THE PRESIDENT MAY DISCONTINUE ANY PROGRAM OR EXPENDITURE THAT HE OR SHE DETERMINES IS INCONSISTENT WITH THESE POLICIES

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		FORM 990 REVIEW PROCESS A DRAFT OF THE FORM 990 WAS ORIGINALLY PROVIDED TO EACH MEMBER OF THE INVESTMENT COMMITTEE THE DISCLOSURES, SIGNIFICANT CHANGES AND QUESTIONS WERE DISCUSSED AND ADDRESSED THE FORM 990 WAS SUBSEQUENTLY PRESENTED TO EACH MEMBER OF THE BOARD OF DIRECTORS AT A REGULARLY SCHEDULED MEETING THE DISCLOSURES, SIGNIFICANT CHANGES AND QUESTIONS WERE AGAIN DISCUSSED AND ADDRESSED

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS SDSU RESEARCH FOUNDATION REQUIRES EACH INTERESTED PARTY TO DISCLOSE ANNUALLY INTERESTS THAT COULD GIVE RISE TO CONFLICTS SDSU RESEARCH FOUNDATION ALSO MONITORS COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICY THROUGH ITS PURCHASING AND SPONSORED RESEARCH DEVELOPMENT DEPARTMENTS SDSU RESEARCH FOUNDATION STAFF REVIEWS CONTRACTS AND REQUISITIONS FOR POTENTIAL CONFLICTS MANY OF ITS INTERNAL PROCESSING DOCUMENTS INCLUDE AFFIRMATIONS REGARDING LACK OF CONFLICTS THE BOARD OF DIRECTORS IS AUTHORIZED TO TAKE WHATEVER ACTION IT DEEMS NECESSARY TO RESOLVE POTENTIAL OR ACTUAL CONFLICTS INCLUDING (1) PROHIBITING THE INTERESTED PARTY FROM DISCUSSIONS OR DECISIONS REGARDING THE CONFLICT OF INTEREST, (2) MODIFYING OR REDEFINING THE DUTIES AND RESPONSIBILITIES OF THE INTERESTED PARTY, OR (3) REQUIRING THE RESIGNATION OF THE INTERESTED PARTY

ldentifier	Return Reference	Explanation						
		FORM 990, PART VI, SECTION B, LINE 15 PURSUANT TO TITLE 5 CAL CODE OF REGS SECTION 42405, SDSU RESEARCH FOUNDATION MAINTAINS SALARY SCHEDULES COMPARABLE TO SAN DIEGO STATE UNIVERSITY (A CALIFORNIA PUBLIC INSTITUTION) THE SALARIES OF THE EXECUTIVE DIRECTOR AND THE CFO ARE ALSO SUBJECT TO APPROVAL BY THE BOARD OF DIRECTORS						

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	OTHER ORGANIZATIONAL DOCUMENTS PUBLICLY AVAILABLE SDSU RESEARCH FOUNDATION PROVIDES PAPER OR ELECTRONIC COPIES OF ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AUDITED FINANCIAL STATEMENTS, AND A-133 COMPLIANCE REPORTS TO THE PUBLIC ON REQUEST THE ARTICLES OF INCORPORATION, BY LAWS, CONFLICT OF INTEREST POLICY, RESEARCH REPORTS, AUDITED FINANCIAL STATEMENTS, AND A-133 COMPLIANCE REPORTS ARE ALSO AVAILABLE ON THE ORGANIZATION'S WEBSITE

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 1,933,033 INCREASE IN EQUITY OF PLANT FUND ASSETS 2,765,290 TOTAL TO FORM 990, PART XI, LINE 5 4,698,323

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

DLN: 93493080004172

OMB No 1545-0047

2010

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Schedule R (Form 990) 2010

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization
SAN DIEGO STATE UNIVERSITY FOUNDATION
DBA SDSU RESEARCH FOUNDATION
95-6042721

Part I Identification of Disregarded Entities	Complete	ıf the organıza	ition a	answered "Yo	es" o	n Form 990, Part	IV, line 33.)			
(a) Name, address, and EIN of disregarded entity		(b) Primary activity	,	(c) Legal domicile (state or foreign country) (d) Total income		(e) End-of-year assets	(f) Direct controlling entity			
Part II Identification of Related Tax-Exempt or more related tax-exempt organizations of	Drganiza luring the	tions (Complet tax year.)	te ıf t	he organızat	ion a	nswered "Yes" on	Form 990, Part I	V, line 34 becaus	e ıt had	one
(a) Name, address, and EIN of related organization	Pr	(b) ımary actıvıty		(c) Legal domicile (state or foreign country)		(d) kempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity		g) 12(b)(1 rolled nization
									Yes	No
(1) SAN DIEGO STATE UNIVERSITY										
5500 CAMPANILE DRIVE	UNIVERS	JNIVERSITY		CA		GOVERNMENT		N/A		No
SAN DIEGO, CA 92182 33-0373293										
(2) THE CAMPANILE FOUNDATION										
5500 CAMPANILE DRIVE	PHILANTH		СА		501(C)3		LINE 5	N/A		No
SAN DIEGO, CA 92182 33-0868418	ORGANIZ	ATION FOR SDSU								
(3) AZTEC SHOPS LTD										
5500 CAMPANILE DRIVE		BOOKSTORE, FOOD		CA		501(C)3	LINE 11C, III-FI	N/A		No
SAN DIEGO, CA 92182 95-0516240	SERVICE	AND PROPERTY				(-/-				
(4) ASSOCIATED STUDENTS OF SAN DIEGO STATE UNIVERSITY										
5500 CAMPANILE DRIVE		TERING FUNDS IN OF STUDENT		CA		501(C)3	LINE 5	N/A		No
SAN DIEGO, CA 92182 95-6042622	ACTIVITI	ES								
									1	
										1

Cat No 50135Y

art III	Identif	ication of Relate	d Orga	inizations Taxat	ole as a Partners	ship (Complete	ıf the organızatıoı	n answered	"Yes" on Form 9	90, Part I	√, line 34
	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)										
				· ·					413	7.13	1

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h Disprop allocat	rtionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gene mana part	ral or aging	(k) Percentage ownership
							Yes	No		Yes	No	I
(1) GRIDIRON PARTNERSHIP LP 2550 5TH AVENUE STE 1100 SAN DIEGO, CA92103 33-0834273	INVESTMENTS	CA	SDSU FOUNDATION	EXCLUDED	16,741			No			No	
Part IV Identif	ication of Relate	ed Orga	anizations Taxal	ble as a Corpora	tion or Trust ((Complete if the o	organı	zation	answered "Yes"	on Fo	rm 99	90, Part IV,

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Schedule R (Form 990) 2010			Pa	ge 3
Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 39	5, 35A, or 36.)			
Note. Complete line 1 if any entity is listed in Parts II, III or IV		T	Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?				
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a	,	Yes	
b Gift, grant, or capital contribution to other organization(s)	1b	,	Yes	
c Gift, grant, or capital contribution from other organization(s)	1c	: \	Yes	
d Loans or loan guarantees to or for other organization(s)	1d	1		No
e Loans or loan guarantees by other organization(s)	1e	<u> </u>	Yes	
f Sale of assets to other organization(s)	1f	+	\dashv	No
g Purchase of assets from other organization(s)	1 g	,		No
h Exchange of assets	1h	1		No
i Lease of facilities, equipment, or other assets to other organization(s)	<u>1i</u>	<u>'</u>	Yes	
j Lease of facilities, equipment, or other assets from other organization(s)	1 <u>j</u>	 \	Yes	
k Performance of services or membership or fundraising solicitations for other organization(s)	1k	۲ ،	Yes	
I Performance of services or membership or fundraising solicitations by other organization(s)	11	1	Yes	
m Sharing of facilities, equipment, mailing lists, or other assets	1n	n \	Yes	
n Sharing of paid employees	1n	, ,	Yes	
• Reimbursement paid to other organization for expenses	10	,	Yes	
p Reimbursement paid by other organization for expenses	1p	_	Yes	
q Other transfer of cash or property to other organization(s)	19	<u> </u>	Yes	
r Other transfer of cash or property from other organization(s)	1r	_		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresho	olds
--	------

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) GRIDIRON PARTNERSHIP LP	Α	16,741	FORM K-1
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d Are parti sect 501(d organiz	ners ion :)(3) :ations?	(e) Share of end-of-year assets		rtionate cions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	agını tner?
			Yes	No		Yes	No		Yes	N
										+
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Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Ident if ier	Return Reference	Explanation				
	V, LINE 1 - TRANSACTIONS WITH RELATED ORGANIZATIONS	SOME OF THE ENDOWMENTS OF SDSU RESEARCH FOUNDATION ("SDSURF") ARE INVESTED IN THE ENDOWMENT POOL OF THE CAMPANILE FOUNDATION (ANOTHER SDSU AUXILIARY ORGANIZATION) (1B) & (1Q)-IN ACCORDANCE WITH ITS EXEMPT FUNCTION, SDSURF REGULARLY TRANSFERS MONIES TO SDSURF (1I)-SDSURF LEASES FACILITIES TO AZTEC SHOPS AND SDSU (1J)-SDSURF LEASES FACILITIES FROM SDSU (1K) & (1L)-SDSURF PERFORMS SERVICES FOR THE CAMPANILE FOUNDATION, AZTEC SHOPS, LTD, AND ASSOCIATED STUDENTS OF SDSU SDSU AND AZTEC SHOPS, LTD PERFORM SERVICES FOR SDSURF (1M) & (1N)-ALL FIVE ORGANIZATIONS REIMBURSE EACH OTHER FOR EXPENSES				
	'	NO SERVICES OR ASSETS WERE RECEIVED THE AMOUNT OF INTEREST AND DEDUCTIONS ALLOCATED WAS BASED ON THE PARTNERS' PRO- RATA SHARE OF THE PARTNERSHIP'S INCOME				

Schedule R (Form 990) 2010